

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>	<i>12</i>	<i>12-27-01</i>
O.I.P.E. CLASSIFIER		<i>927</i>	<i>12/16</i>
FORMALITY REVIEW	<i>3m</i>	<i>838</i>	<i>01/25/02</i>
RESPONSE FORMALITY REVIEW	<i>Ok</i>		<i>03/07/02</i>

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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02-57-1  
 03-05-02  
 850